1	NDIDATE / OFFICEHOLDER INANCE REPORT	6901	FORM JC/OH COVER SHEET PG 1
The JC/OH Instruction G	Guide explains how to complete this form.	DUNT# s Commission filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST MR. LEONARD NICKNAME LAST SAENZ	R SUFFIX	OFFICE USE ONLY Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX: APT / SUITE #: CITY; P. O. Box 43334 Auxin , Tro. 78704	STATE: ZIP CODE	Date Hand-delivered or Date Postmarked
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (5/2) 698 - 38/8	EXTENSION	Receipt # 03 Amount Date Processed
6 CAMPAIGN . TREASURER NAME	MS/MRS/MR FIRST M. Gary NICKNAME LAST Rodniquez	MI SUFFIX	Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: P.D. Box 43334 Aust	CITY: STATE,	787 by
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (5/2) 6/3 -38/8	EXTENSION	
9 REPORTTYPE	January 15 30th day before election July 15 8th day before election	Runoff Exceeded \$500 limit	15th day after campaign treasurer appointment (officeholder only) Final report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year 1 / 15 / 08 THROUGH	Month Day 7 15	Year / 0 8
11 ELECTION	ELECTION DATE Month Dey Year Primary Primary	Runoff [General Special
12 OFFICE	OFFICE HELD (if any)	3 OFFICE SOUGHT (IF know	Count chlow #5
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS	Direct campaign expenditures are campaign expenditures man Candidates are required to disclose this information only if they re Name Address / PO Box: Apt. / Suite #, City, State; Zip Code	de by others without the car	ididate's prior consent or approval.
. addilional pages	GO TO PAGE 2		
	GO TO PAGE A	<u>~</u>	

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: **SUPPORT & TOTALS**

FORM JC/OH COVER SHEET PG 2

15 C/OH NAME	PONANO R.	4y Saenz 1	6 ACCOUNT # (Ethics Commission Filers)		
17 NOTICE FROM POLITICAL	 This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. 				
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME			
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS			
18 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THANES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE			
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0		
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED		\$ 6		
	4. TOTAL	POLITICAL EXPENDITURES	\$ 0		
CONTRIBUTION BALANCE		OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST I REPORTING PERIOD	\$ /79.38		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$				
19 AFFIDAVIT					
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.					
MY COMMISSION EXPIRES December 13, 2009					
AFFIX NOTARY STAMP / SEAL ABOVE					
Sworn to and subscribed before me, by the said Leonard Ray Saenz, this the 11th day					
of JWH , 20 08 , to certify which, witness my hand and seal of office.					
Signature of officer admir	MMM Mistering oath	LISAD BYOWN Print name of officer administering oath T	Notary Public Title of officer administering oath		